

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF PENNSYLVANIA

In re Henry Charles Herrmann and Karen Joan Herrmann

Case No. 17-14040-MDC
Reporting Period: October, 2017

MONTHLY OPERATING REPORT

File with Court and submit copy to United States Trustee within 20 days after end of month.

Submit copy of report to any official committee appointed in the case.

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached	Affidavit/Supplement Attached
Schedule of Cash Receipts and Disbursements	MOR-1	X		
Bank Reconciliation (or copies of debtor's bank reconciliations)	MOR-1a	X		
Schedule of Professional Fees Paid	MOR-1b	X		
Copies of bank statements		X		
Cash disbursements journals		X		
Statement of Operations	MOR-2	X		
Balance Sheet	MOR-3	X		
Status of Postpetition Taxes	MOR-4	X		
Copies of IRS Form 6123 or payment receipt				
Copies of tax returns filed during reporting period				
Summary of Unpaid Postpetition Debts	MOR-4	X		
Listing of aged accounts payable	MOR-4	X		
Accounts Receivable Reconciliation and Aging	MOR-5	X		
Debtor Questionnaire	MOR-5	X		

I declare under penalty of perjury (28 U.S.C. Section 1746) that this report and the attached documents are true and correct to the best of my knowledge and belief.

Signature of Debtor

Date

Signature of Joint Debtor

Date

Signature of Authorized Individual*

Date

Printed Name of Authorized Individual

Title of Authorized Individual

*Authorized individual must be an officer, director or shareholder if debtor is a corporation; a partner if debtor is a partnership; a manager or member if debtor is a limited liability company.

In re: Henry Charles Herrmann and Karen Joan Herrmann
Debtor

Case No.: 17-14040-MDC
Reporting Period: October, 2017

SCHEDULE OF CASH RECEIPTS AND DISBURSEMENTS

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. The amounts reported in the "CURRENT MONTH - ACTUAL" column must equal the sum of the four bank account columns. The amounts reported in the "PROJECTED" columns should be taken from the SMALL BUSINESS INITIAL REPORT (FORM IR-1). Attach copies of the bank statements and the cash disbursements journal. The total disbursements listed in the disbursements journal must equal the total disbursements reported on this page. A bank reconciliation must be attached for each account. [See MOR-1 (CONT)]

	BANK ACCOUNTS				CURRENT MONTH		CUMULATIVE FILING TO DATE	
	OPER	PAYROLL	TAX	OTHER	ACTUAL	PROJECTED	ACTUAL	PROJECTED
CASH BEGINNING OF MONTH	\$1,993.60				\$1,993.60		\$3,871.46	
RECEIPTS								
CASH SALES								
ACCOUNTS RECEIVABLE								
LOANS AND ADVANCES								
SALE OF ASSETS								
OTHER (ATTACH LIST)	\$10,106.88				\$10,106.88		\$148,064.18	
TRANSFERS (FROM DIP ACCTS)								
TOTAL RECEIPTS	\$10,106.88				\$10,106.88		\$148,064.18	
DISBURSEMENTS								
NET PAYROLL								
PAYROLL TAXES								
SALES, USE, & OTHER TAXES								
INVENTORY PURCHASES								
SECURED/ RENTAL/ LEASES							\$59,773.06	
INSURANCE								
ADMINISTRATIVE								
SELLING								
OTHER (ATTACH LIST)	\$9,195.28				\$9,195.28		\$88,932.38	
OWNER DRAW *								
TRANSFERS (TO DIP ACCTS)								
PROFESSIONAL FEES								
U.S. TRUSTEE QUARTERLY FEES							\$325.00	
COURT COSTS								
TOTAL DISBURSEMENTS	\$9,195.28				\$9,195.28		\$149,030.44	
NET CASH FLOW	\$911.60				\$911.60		(\$966.26)	
(RECEIPTS LESS DISBURSEMENTS)								
CASH - END OF MONTH	\$2,905.20				\$2,905.20		\$2,905.20	

* COMPENSATION TO SOLE PROPRIETORS FOR SERVICES RENDERED TO BANKRUPTCY ESTATE

THE FOLLOWING SECTION MUST BE COMPLETED

DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES: (FROM CURRENT MONTH ACTUAL COLUMN)

TOTAL DISBURSEMENTS	\$9,195.28
LESS: TRANSFERS TO DEBTOR IN POSSESSION ACCOUNTS	\$
PLUS: ESTATE DISBURSEMENTS MADE BY OUTSIDE SOURCES (i.e. from escrow accounts)	\$
TOTAL DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES	\$9,195.28

HENRY CHARLES HERRMANN AND KAREN JOAN HERRMANN
CASE NO. 17-14040-MDC
OCTOBER, 2017
ATTACHMENT TO MOR-1

LIST OF RECEIPTS

<u>Source</u>	<u>Amount</u>
Rental Income (NC)	\$ 8,041.88
Rental Income (PA)	\$ 1,295.00
Rental Income (NJ)	<u>\$ 770.00</u>
	\$10,106.88

Wells Fargo Everyday Checking

Account number: 2204735704 ■ October 1, 2017 - October 31, 2017 ■ Page 1 of 6



KAREN J HERRMANN
HENRY C HERRMANN
DEBTOR IN POSSESSION
CH11 CASE 17-14040(EPA)
1460 S WHITFORD RD
WEST CHESTER PA 19380-1069

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-TO-WELLS (1-800-869-3557)

TTY: 1-800-877-4833

En español: 1-877-727-2932

華語 1-800-288-2289 (6 am to 7 pm PT, M-F)

Online: wells Fargo.com

Write: Wells Fargo Bank, N.A. (345)

P.O. Box 6995

Portland, OR 97228-6995

You and Wells Fargo

Thank you for being a loyal Wells Fargo customer. We value your trust in our company and look forward to continuing to serve you with your financial needs.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wells Fargo.com or call the number above if you have questions or if you would like to add new services.

Online Banking	<input checked="" type="checkbox"/>	Direct Deposit	<input checked="" type="checkbox"/>
Online Bill Pay	<input checked="" type="checkbox"/>	Auto Transfer/Payment	<input type="checkbox"/>
Online Statements	<input type="checkbox"/>	Overdraft Protection	<input type="checkbox"/>
Mobile Banking	<input checked="" type="checkbox"/>	Debit Card	<input type="checkbox"/>
My Spending Report	<input checked="" type="checkbox"/>	Overdraft Service	<input type="checkbox"/>

Activity summary

Beginning balance on 10/1	\$1,993.60
Deposits/Additions	10,106.88
Withdrawals/Subtractions	- 9,195.28
Ending balance on 10/31	\$2,905.20

Account number: 2204735704

KAREN J HERRMANN
HENRY C HERRMANN
DEBTOR IN POSSESSION
CH11 CASE 17-14040(EPA)

Pennsylvania account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): 031000503

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Account number: 2204735704 ■ October 1, 2017 - October 31, 2017 ■ Page 2 of 6



Transaction history

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
10/2		Purchase authorized on 09/30 Timothy Off Heatin West Chester PA S467273519376038 Card 5365		315.00	
10/2		Purchase authorized on 09/30 Petvalu #5190 Exton PA P00000000779682488 Card 5365		32.50	
10/2		Purchase authorized on 09/30 East Coast Exton Exton PA S587273810997911 Card 5365		53.52	
10/2		Purchase authorized on 09/30 Giant 6051 Exton PA P00587273818002605 Card 5365		14.19	
10/2		Purchase authorized on 10/01 Giant 6505 West Chester PA P00307274832560285 Card 5365		100.00	
10/2		ATM Withdrawal authorized on 10/02 999 Paoli Pike West Chester PA 0009981 ATM ID 0141x Card 5365		200.00	
10/2		United World Hth SEP Inspm 171001 4Np913 Henry C Herrmann		466.74	811.65
10/3		ATM Check Deposit on 10/03 100 W. Lincoln Hwy Exton PA 0005712 ATM ID 0123E Card 5365	1,295.00		
10/3		Purchase authorized on 10/02 Bimbo Bakeries 601 Exton PA S307275635927272 Card 5365		10.00	
10/3		Purchase authorized on 10/02 United Healthcare 888-873-6797 CT S307275717946895 Card 5365		68.20	
10/3		Recurring Payment authorized on 10/03 Charter Comm 888-438-2427 MO S467276187027909 Card 5365		163.15	1,865.30
10/4		Twiddy & Company Proceeds 10/17 1471 Herrmann, Karen	1,917.61		
10/4		Twiddy & Company Proceeds 10/17 1471 Herrmann, Karen	2,790.41		
10/4		Twiddy & Company Proceeds 10/17 1471 Herrmann, Karen	3,333.86		
10/4		ATM Check Deposit on 10/04 100 W. Lincoln Hwy Exton PA 0005920 ATM ID 0123E Card 5365	770.00		
10/4		Purchase authorized on 10/04 Giant 6051 Exton PA P00307277649000381 Card 5365		42.37	
10/4		Purchase authorized on 10/04 Petvalu #5190 Exton PA P00000000183048422 Card 5365		32.50	
10/4		Purchase authorized on 10/04 Ulla #755 Exton PA P00000000635728989 Card 5365		11.58	
10/4		Purchase authorized on 10/04 Giant 6051 Exton PA P00387277836085482 Card 5365		9.85	10,580.87
10/5		Cash eWithdrawal in Branch/Store 10/05/2017 11:46 Am 100 W Lincoln Hwy Exton PA 5365		1,300.00	
10/5		Purchase authorized on 10/05 Wegmans 1056 E Lancaster Downingtown PA P00467278586645398 Card 5365		59.50	9,221.37
10/6		Purchase authorized on 10/05 East Coast Exton Exton PA S307278597559220 Card 5365		44.92	9,176.45
10/10		Purchase authorized on 10/07 The Home Depot #4137 Downingtown PA P00387280640703264 Card 5365		11.09	
10/10		ATM Withdrawal authorized on 10/07 100 W. Lincoln Hwy Exton PA 0008894 ATM ID 0123E Card 5365		200.00	
10/10		Purchase authorized on 10/07 Cvs/Pharm 03875--1450 West Chester PA P00000000981166567 Card 5365		33.93	
10/10		Purchase authorized on 10/08 Giant 6051 Exton PA P00587282018060640 Card 5365		34.73	
10/10		Purchase authorized on 10/10 Mdhearingaid, Inc. 312-366-3899 IL S307282492002864 Card 9861		399.99	
10/10		Purchase authorized on 10/09 Giant 6051 Exton PA P00587282656419185 Card 5365		1.75	
10/10		Recurring Payment authorized on 10/10 Comcast 800-Comcast NJ S587283184707472 Card 5365		219.15	
10/10		Purchase authorized on 10/10 Giant 6051 Exton PA P00387283677234634 Card 5365		38.06	8,237.75
10/11		Purchase authorized on 10/10 Malvern Veterinary Malvern PA S467283505209568 Card 5365		289.00	
10/11		Purchase authorized on 10/10 Avante' on Main St Exton PA S387283605994942 Card 5365		150.00	

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Transaction history (continued)

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
10/11		Purchase authorized on 10/10 Eb 38th Annual Sta 801-413-7200 CA S467283804521108 Card 5365		132.24	
10/11		Purchase authorized on 10/11 Staples 0056 Exton PA P00587285001997768 Card 5365		15.33	7,651.18
10/12		Purchase authorized on 10/10 Exton Beverage Com Exton PA S46728365898360 Card 5365		27.44	
10/12		Purchase authorized on 10/12 Ulla #755 Exton PA P00000000970246974 Card 5365		22.18	
10/12		Purchase authorized on 10/12 Giant 6051 Exton PA P00587285676446302 Card 5365		41.48	7,560.08
10/13		Purchase authorized on 10/13 Wegmans 1056 E Lancaster Downingtown PA P00467286617974126 Card 5365		5.13	
10/13		Purchase authorized on 10/13 Wegmans 1056 E Lancaster Downingtown PA P00307286635090722 Card 5365		162.38	
10/13		Purchase authorized on 10/13 Wegmans 1056 E Lancaster Downingtown PA P00587286638114668 Card 5365		61.94	
10/13		Purchase authorized on 10/13 Petvalu #5190 Exton PA P0000000033018935 Card 5365		32.50	
10/13		Purchase authorized on 10/13 Staples 0066 Exton PA P00387286720618392 Card 5365		19.66	7,278.47
10/16		Purchase authorized on 10/13 Bimbo Bakeries 601 Exton PA S587286735350168 Card 5365		6.24	
10/16		Purchase authorized on 10/14 East Coast Exton Exton PA S307287659106025 Card 5365		38.00	
10/16		Purchase authorized on 10/16 Wegmans 1056 E Lancaster Downingtown PA P00587289647443891 Card 5365		53.25	
10/16		Purchase authorized on 10/16 Petsmart # 0564 Downingtown PA P00467289658982115 Card 5365		34.96	
10/16		Prog Specialty Ins Prem 171016 Pol xxxxx5590 Karen Herrmann		2,047.03	5,098.99
10/18		Purchase authorized on 10/17 Fsi Verizon+Bmc \$3. 800-345-6563 TX S587289586138319 Card 5365		234.17	
10/18		Purchase authorized on 10/16 Verizon Wrls 03631 Downingtown PA S467289632380036 Card 5365		31.79	
10/18		Purchase authorized on 10/18 Wine and Spirits 1501 Exton PA P00000000434496879 Card 5365		29.67	4,803.36
10/19		Purchase authorized on 10/18 American-Water-Play 800-272-1325 NJ S307291533888109 Card 5365		401.95	
10/19		Recurring Payment authorized on 10/19 Charter Comm 888-438-2427 MO S307292185876146 Card 5365		124.66	
10/19		Purchase authorized on 10/19 Giant 6505 West Chester PA P00467292578493398 Card 5365		17.61	
10/19		Purchase authorized on 10/19 Giant 6505 West Chester PA P00467292747838181 Card 5365		10.28	
10/19		Purchase authorized on 10/19 Petvalu #5190 Exton PA P00000000571219610 Card 5365		32.50	
10/19		ATM Withdrawal authorized on 10/19 100 Painter's Crossing West Chester PA 0002900 ATM ID 0195Q Card 5365		200.00	4,016.36
10/20		Purchase authorized on 10/20 Cvs/Pharm 00948-1544 Westchester PA P00000000976333762 Card 5365		21.19	3,995.17
10/23		Recurring Payment authorized on 10/21 LA Fitness 949-255-7200 CA S467294256947106 Card 5365		29.99	
10/23		Purchase authorized on 10/21 Rite Aid Store - 11151 West Chester PA P00587294731634070 Card 5365		15.00	
10/23		Purchase authorized on 10/22 Giant 6505 West Chester PA P00307295667231479 Card 5365		9.13	
10/23		Purchase authorized on 10/22 East Coast Exton Exton PA S387295801313895 Card 5365		45.43	
10/23		Purchase authorized on 10/23 Wegmans 1056 E Lancaster Downingtown PA P00387296587763057 Card 5365		4.03	
10/23		Purchase authorized on 10/23 Wegmans 1056 E Lancaster Downingtown PA P00467296607681145 Card 5365		40.96	

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Transaction history (continued)

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
10/23		Purchase authorized on 10/23 Giant 6051 Exton PA P00387296734765148 Card 5365		37.49	3,813.14
10/24		Purchase authorized on 10/24 Peico 1853 Exton PA P00090000677133398 Card 5365		16.29	3,796.85
10/25		Recurring Payment authorized on 10/24 LA Fitness 949-255-7200 CA S587297265765468 Card 5365		28.99	
10/25		Purchase authorized on 10/24 Malvern Veterinary Malvern PA S587297762087323 Card 5365		95.99	
10/25		Recurring Payment authorized on 10/25 Charter Comm 688-438-2427 MO S307298180919235 Card 5365		174.94	
10/25		ATM Withdrawal authorized on 10/25 100 W. Lincoln Hwy Exton PA 0001206 ATM ID 0123E Card 5365		100.00	
10/25		Purchase authorized on 10/25 Giant 6051 Exton PA P0046729877822823 Card 5365		46.56	3,349.37
10/26		Purchase authorized on 10/25 Bimbo Bakeries 601 Exton PA S307298568726042 Card 5365		5.10	
10/26		Purchase authorized on 10/25 Premier Orthopedic Kennett Sq PA S307298610350339 Card 5365		10.00	3,334.27
10/27		Recurring Payment authorized on 10/26 ADT Security*06040 WWW.ADT.Com FL S307299280639649 Card 5365		190.64	
10/27		Purchase authorized on 10/27 Petvalu #5190 Exton PA P00000000973891125 Card 5365		32.50	3,111.13
10/30		Purchase authorized on 10/27 Qvc*512078262101* 800-367-9444 PA S307295589632281 Card 5365		63.56	
10/30		Purchase authorized on 10/29 Rite Aid Store - 11151 West Chester PA P00387302800817115 Card 5365		7.00	
10/30		Purchase authorized on 10/30 Cvs/Pharm 00948--1544 Westchester PA P0C000000675069455 Card 5365		24.77	
10/30		Purchase authorized on 10/30 Wine and Spirits 1516 West Chester PA P00000000185628740 Card 5365		19.07	
10/30		Purchase authorized on 10/30 Pet Supplies Plus 9059 West Chester PA P00467303716602424 Card 5365		15.77	
10/30		Purchase authorized on 10/30 #07882 Acme West Chester PA P00467303744502668 Card 5365		17.89	2,963.07
10/31		Purchase authorized on 10/29 Famous Toastery Exton PA S387302671133333 Card 5365		28.69	
10/31		Purchase authorized on 10/31 Giant 6505 West Chester PA P00587304539780957 Card 5365		29.18	2,905.20
Ending balance on 10/31					2,905.20
Totals			\$10,106.88	\$9,195.28	

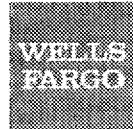
The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For a complete list of fees and detailed account information, see the Wells Fargo Account Fee and Information Schedule and Account Agreement applicable to your account (EasyPay Card Terms and Conditions for prepaid cards) or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 10/01/2017 - 10/31/2017	Standard monthly service fee \$10.00	You paid \$0.00
How to avoid the monthly service fee	Minimum required	This fee period
Have any ONE of the following account requirements		
• Minimum daily balance	\$1,500.00	\$811.65 <input type="checkbox"/>
• Total amount of qualifying direct deposits	\$500.00	\$8,041.88 <input checked="" type="checkbox"/>
• Total number of posted Wells Fargo Debit Card purchases and/or payments	10	70 <input checked="" type="checkbox"/>
• The fee is waived when the account is linked to a Wells Fargo Campus ATM or Campus Debit Card		

Account number: **2204735704** ■ October 1, 2017 - October 31, 2017 ■ Page 5 of 6



Monthly service fee summary (continued)

Monthly service fee discount(s) (applied when box is checked)

Age of primary account owner is 17 - 24 (\$5.00 discount)

☐

RC-EC

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Worksheet to balance your account

Follow the steps below to reconcile your statement balance with your account register balance. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.

- A** Enter the ending balance on this statement.

- B** List outstanding deposits and other credits to your account that do not appear on this statement. Enter the total in the column to the right.

Description	Amount
Total	\$

- C Add A and B to calculate the subtotal.

- D** List outstanding checks, withdrawals, and other debits to your account that do not appear on this statement. Enter the total in the column to the right.

[illegible]

- E** Subtract **D** from **C** to calculate the adjusted ending balance. This amount should be the same as the current balance shown in your register.

General statement policies for Wells Fargo Bank

- 8 To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts. You have the right to dispute the accuracy of information that Wells Fargo Bank, N.A. has furnished to a consumer reporting agency by writing to us at Overdraft Collection and Recovery, P.O. Box 5058, Portland, OR 97208-5058. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

- IN** In case of errors or questions about your electronic transfers, telephone us at the number printed on the front of this statement or write us at Wells Fargo Bank, P.O. Box 6995, Portland, OR 97228-6995 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number (if any).
2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

Register
for 2017
October

AD - Automatic Deposit • AP - Automatic Payment • ATM - Cash Withdrawal • DC - Debit Card • FI - Funds Transfer • SC - Service Charge • TD - Tax Deductible	MEMBER OR CARD	DATE	TRANSACTION DESCRIPTION	PAYMENT, INC. WITHDRAWAL (+)	✓	REPORT CREDIT (+)	REPORT DEBIT (-)
		10/2	Heat repair	315.00			
		10/2	Pet Value	32.50			
		10/2	East Coast / gas	53.52			
		10/2	Giant	14.19			
		10/2	Giant	100.00			
		10/2	ATM - withdraw	200.00			
		10/2	United World Healthcare	466.74			
		10/3	1442 S. Whitford Road			1295.00	
		10/3	Entertainment / pinbo	10.00			
		10/3	United Healthcare	68.20			
		10/3	Chatter (NC)	163.15			
		10/4	Twiddy - rental records (NC)			1917.61	
		10/4	Twiddy - rental records (NC)			2790.41	

AD - Automatic Deposit • AP - Automatic Payment • ATM - Cash Withdrawal • DC - Debit Card • FI - Funds Transfer • SC - Service Charge • TD - Tax Deductible	NUMBER ON CARD	DATE	TRANSACTION DESCRIPTION	PAYMENT TYPE WITHDRAWAL FI	DEPOSIT CREDIT FI	TOTAL
		10/4	Twiddy - rental pool (NO)	✓	333.86	\$
		10/4	Deposit (NS rental)		770.00	
		10/4	Giant	42.37		
		10/4	Pet Valu	32.50		
		10/4	Ultra	11.57		
		10/4	Giant	9.85		
		10/5	John D. Abbridge	1300.00		
		10/5	Wegmans	59.50		
		10/6	East Coast/gas	44.92		
		10/6	Home Depot	11.09		
		10/6	ATM - withdraw	200.00		
		10/6	CVS pharmacy	33.93		
		10/6	Giant	34.73		

AD - Automatic Deposit • AP - Automatic Payment • ATM - Cash Withdrawal • DC - Debit Card • FT - Funds Transfer • SC - Service Charge • TD - Tax Deductible	NUMBER ON CARD	DATE	TRANSACTION DESCRIPTION	PAYMENT REC. WITHDRAWN (1)	DEBIT CARD (2)	TO A/C
		10/10	Md heavy aid Inc.	399.99		\$
		10/10	Giant	1.75		
		10/10	Comcast (NS)	219.15		
		10/10	Giant	38.86		
		10/11	Madison Vet Hospital	289.00		
		10/11	Avante - hair	150.00		
		10/11	38th Annual donation	132.24		
		10/11	Staples	15.33		
		10/12	Exton beverage	27.44		
		10/12	Litza	22.18		
		10/12	Giant	41.48		
		10/13	Wegmans	5.13		
		10/13	Wegmans	162.38		

AD - Automatic Deposit • AP - Automatic Payment • ATM - Cash Withdrawal • DC - Debit Card • FI - Funds Transfer • SC - Service Charge • TD - Tax Deductible	DATE	TRANSACTION DESCRIPTION	PAYMENT OF WITHDRAWAL	DEPOSIT	NET
	10/13	Wegmans Pharmacy	61.94		
	10/13	Pet Value	32.50		
	10/13	Staples	19.66		
	10/16	Entertainment / books	6.24		
	10/16	East Coast Gas	38.00		
	10/16	Wegmans	53.25		
	10/16	Petsmart	34.96		
	10/16	Procella Insurance	2047.83		
	10/18	Verizon - TV, internet	234.17		
	10/18	Verizon - Wireless	31.79		
	10/18	Wine + Spirits	29.67		
	10/19	Am. Water (W)	401.95		
	10/19	Charter Comm	124.66		

AD - Automatic Deposit • AP - Automatic Payment • ATM - Cash Withdrawal • DC - Debit Card • FI - Funds Transfer • SC - Service Charge • TD - Tax Deductible		TRANSACTION DESCRIPTION		PAYABLE TO WITHDRAWAL (\$)	✓	REPORT CREDIT (\$)	\$
DATE	NUMBER OF						
10/25		LA Fitness		29.99			
10/25		Medvet Vet Hospital		95.99			
10/25		Chatter Comm. (nc)		174.94			
10/25		Atm - Withdrawal		100.00			
10/25		Giant		46.56			
10/26		Entertainment / bingo		5.10			
10/26		Orthopedic (Kum)		10.00			
10/27		ADT Security (PA)		190.64			
10/27		Pet Vets		32.50			
10/30		QVC -		63.56			
10/30		Rite Aid		7.00			
10/30		CVS pharmacy		24.99			
10/30		Wine + Spirits		19.09			

AD - Automatic Deposit • AP - Automatic Payment • ATM - Cash Withdrawal • CC - Credit Card • FI - Funds Transfer • SC - Service Charge • TD - Tax Deductible

NUMBER (or CHECK)	DATE	TRANSACTION DESCRIPTION	AMOUNT (or WITHDRAWAL)	DEPOSIT CHECK (or CREDIT)	\$
	10/30	Pet Supplies	15.77		
	10/30	Home	17.89		
	10/31	Home Transfer	28.69		
	10/31	Client	29.18		
		end balance			2905.20

In re: Henry Charles Hermann and Karen Joan Hermann
Debtor

Case No.: 17-14040-MDC
Reporting Period: October, 2017

SCHEDULE OF PROFESSIONAL FEES AND EXPENSES PAID

This schedule is to include all retained professional payments from case inception to current month.

[illegible]

In re: Henry Charles Herrmann and Karen Joan Herrmann
Debtor

Case No.: 17-14040-MDC
Reporting Period.: October, 2017

STATEMENT OF OPERATIONS
(Income Statement)

The Statement of Operations is to be prepared on an accrual basis. The accrual basis of accounting recognizes revenue when it is realized and expenses when they are incurred, regardless of when cash is actually received or paid.

REVENUES	Month	Cumulative Filing to Date
Gross Revenues	\$10,106.88	\$148,064.18
Less: Returns and Allowances		
Net Revenue	\$10,106.88	\$148,064.18
COST OF GOODS SOLD		
Beginning Inventory		
Add: Purchases		
Add: Cost of Labor		
Add: Other Costs (attach schedule)		
Less: Ending Inventory		
Cost of Goods Sold		
Gross Profit		
OPERATING EXPENSES		
Advertising		
Auto and Truck Expense		
Bad Debts		
Contributions		
Employee Benefits Programs		
Insider Compensation*		
Insurance		
Management Fees/Bonuses		
Office Expense		
Pension & Profit-Sharing Plans		
Repairs and Maintenance		
Rent and Lease Expense		
Salaries/Commissions/Fees		
Supplies		
Taxes - Payroll		
Taxes - Real Estate		
Taxes - Other		
Travel and Entertainment		
Utilities		
Other (attach schedule)	\$2,698.85	\$110,352.18
Total Operating Expenses Before Depreciation		
Depreciation/Depletion/Amortization		
Net Profit (Loss) Before Other Income & Expenses		
OTHER INCOME AND EXPENSES		
Other Income (attach schedule)		
Interest Expense		
Other Expense (attach schedule)	\$6,496.43	\$38,353.26
Net Profit (Loss) Before Reorganization Items		
REORGANIZATION ITEMS		
Professional Fees		
U. S. Trustee Quarterly Fees		\$325.00
Interest Earned on Accumulated Cash from Chapter 11 (see continuation sheet)		
Gain (Loss) from Sale of Equipment		
Other Reorganization Expenses (attach schedule)		
Total Reorganization Expenses		
Income Taxes		
Net Profit (Loss)		\$

*"Insider" is defined in 11 U.S.C. Section 101(31).

In re: Henry Charles Herrmann and Karen Joan Herrmann
Debtor

Case No.: 17-14040-MDC
Reporting Period: October, 2017

STATEMENT OF OPERATIONS - continuation sheet

BREAKDOWN OF "OTHER" CATEGORY	Month	Cumulative Filing to Date
Other Costs		
Other Operational Expenses		
Mortgage Payments	\$0.00	\$59,773.06
Utilities (NC, NJ, PA, WC)	\$1,083.85	\$13,662.76
Rental Property Expenses (NC, NJ, PA)	\$1,615.00	\$36,916.36
Other Income		
Other Expenses		
Food	\$811.97	\$4,094.98
Healthcare	\$670.89	\$4,084.39
Transportation	\$2,228.90	\$3,960.73
Miscellaneous	\$2,784.67	\$26,213.16
Other Reorganization Expenses		

Reorganization Items - Interest Earned on Accumulated Cash from Chapter 11:

Interest earned on cash accumulated during the chapter 11 case, which would not have been earned but for the bankruptcy proceeding, should be reported as a reorganization item.

In re: Henry Charles Herrmann and Karen Joan Herrmann
Debtor

Case No.: 17-14040-MDC
Reporting Period: October, 2017

BALANCE SHEET

The Balance Sheet is to be completed on an accrual basis only. Pre-petition liabilities must be classified separately from postpetition obligations.

ASSETS	BOOK VALUE AT END OF CURRENT REPORTING MONTH	BOOK VALUE ON PETITION DATE
CURRENT ASSETS		
Unrestricted Cash and Equivalents	\$2,905.20	\$7,500.00
Restricted Cash and Cash Equivalents (see continuation sheet)		
Accounts Receivable (Net)		
Notes Receivable		
Inventories		
Prepaid Expenses		
Professional Retainers		
Other Current Assets (attach schedule)		
TOTAL CURRENT ASSETS	\$2,905.20	\$7,500.00
PROPERTY AND EQUIPMENT		
Real Property and Improvements	\$7,028,000.00	\$7,028,000.00
Machinery and Equipment		
Furniture, Fixtures and Office Equipment		
Leasehold Improvements		
Vehicles		
Less Accumulated Depreciation		
TOTAL PROPERTY & EQUIPMENT	\$7,028,000.00	\$7,028,000.00
OTHER ASSETS		
Loans to Insiders*		
Other Assets (attach schedule) See Schedule A/B	\$212,008.00	\$212,008.00
TOTAL OTHER ASSETS	\$212,008.00	\$212,008.00
TOTAL ASSETS	\$7,242,913.20	\$7,247,508.00

LIABILITIES AND OWNER EQUITY	BOOK VALUE AT END OF CURRENT REPORTING MONTH	BOOK VALUE ON PETITION DATE
LIABILITIES NOT SUBJECT TO COMPROMISE (Postpetition)		
Accounts Payable		
Taxes Payable (refer to FORM MOR-4)		
Wages Payable		
Notes Payable		
Rent / Leases - Building/Equipment		
Secured Debt / Adequate Protection Payments		
Professional Fees		
Amounts Due to Insiders*		
Other Postpetition Liabilities (attach schedule)		
TOTAL POSTPETITION LIABILITIES	\$	\$
LIABILITIES SUBJECT TO COMPROMISE (Pre-Petition)		
Secured Debt	\$7,525,782.00	\$7,525,782.00
Priority Debt	\$140,258.00	\$140,258.00
Unsecured Debt	\$99,558.00	\$99,558.00
TOTAL PRE-PETITION LIABILITIES	\$7,765,598.00	\$7,765,598.00
TOTAL LIABILITIES	\$7,765,598.00	\$7,765,598.00
OWNER EQUITY		
Capital Stock		
Additional Paid-In Capital		
Partners' Capital Account		
Owner's Equity Account		
Retained Earnings - Pre-Petition		
Retained Earnings - Postpetition		
Adjustments to Owner Equity (attach schedule)		
Postpetition Contributions (Distributions) (Draws) (attach schedule)		
NET OWNER EQUITY	\$	\$
TOTAL LIABILITIES AND OWNERS' EQUITY	\$7,765,598.00	\$7,765,598.00

*"Insider" is defined in 11 U.S.C. Section 101(31).

Fill in this information to identify your case and this filing:

Debtor 1 **Henry Charles Herrmann**
First Name Middle Name Last Name

Debtor 2 **Karen Joan Herrmann**
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **EASTERN DISTRICT OF PENNSYLVANIA**

Case number **17-14040**

☐ Check if this is an amended filing

Official Form 106A/B
Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

1460 South Whitford Road

Street address, if available, or other description

West Chester **PA** **19380-0000**
City State ZIP Code

Chester
County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$410,000.00**

Current value of the portion you own? **\$410,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

tenants by the entirety

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

Residence

Debtor 1 **Henry Charles Herrmann**
Debtor 2 **Karen Joan Herrmann**

Case number (if known) **17-14040**

If you own or have more than one, list here:

1.2

1442 South Whitford Road

Street address, if available, or other description

West Chester PA 19380-0000

City State ZIP Code

Chester

County

What is the property? Check all that apply

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Rental property

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$185,000.00

Current value of the portion you own?

\$185,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

tenants by the entirety

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.3

2305 Wesley Avenue North

Street address, if available, or other description

Ocean City NJ 08226-0000

City State ZIP Code

Cape May

County

What is the property? Check all that apply

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

rental property

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$1,700,000.00

Current value of the portion you own?

\$1,700,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

tenants by the entirety

☐ Check if this is community property (see instructions)

Debtor 1 **Henry Charles Herrmann**
Debtor 2 **Karen Joan Herrmann**

Case number (if known) **17-14040**

If you own or have more than one, list here:

1.4

472 Island Lead Road

Street address, if available, or other description

Corolla **NC** **27927-0000**
City State ZIP Code

Currituck

County

What is the property? Check all that apply

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Rental property

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$950,000.00**
Current value of the portion you own? **\$950,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

tenants by the entirety

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.5

125 Salt House Road

Street address, if available, or other description

Corolla **NC** **27927-0000**
City State ZIP Code

Currituck

County

What is the property? Check all that apply

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Rental property

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$1,800,000.00**
Current value of the portion you own? **\$1,800,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

tenants by the entirety

☐ Check if this is community property (see instructions)

Debtor 1 **Henry Charles Herrmann**
Debtor 2 **Karen Joan Herrmann**

Case number (if known) **17-14040**

If you own or have more than one, list here:

1.6

159 Salt House Road

Street address, if available, or other description

Corolla **NC** **27927-0000**
City State ZIP Code

Currituck

County

What is the property? Check all that apply

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Rental property

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
\$1,983,000.00

Current value of the portion you own?
\$1,983,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

tenants by the entirety

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$7,028,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

☐ No

☒ Yes

3.1 Make: Mercedes

Model: **450 SL**

Year: **1979**

Approximate mileage:

Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$5,000.00

Current value of the portion you own?

\$5,000.00

3.2 Make: Mercedes

Model: **400SE**

Year: **1992**

Approximate mileage:

Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$4,500.00

Current value of the portion you own?

\$4,500.00

Debtor 1 **Henry Charles Herrmann**
Debtor 2 **Karen Joan Herrmann**

Case number (if known) **17-14040**

3.3 Make: **Hummer**
Model: **H2**
Year: **2004**
Approximate mileage: **71000**
Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$15,608.00

\$15,608.00

3.4 Make: **Hummer**
Model: **H1**
Year: **2006**
Approximate mileage: **40000**
Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$90,000.00

\$90,000.00

3.5 Make: **Case Backhoe**
Model:
Year:
Approximate mileage:
Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$5,000.00

\$5,000.00

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$120,108.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe.....

Residence - Assorted household furniture, including 2 laptop computers

\$10,000.00

Rental property furnishings - assorted furniture and furnishings in rental properties in NJ and NC, including 30 televisions

\$40,000.00

Debtor 1 **Henry Charles Herrmann**
Debtor 2 **Karen Joan Herrmann**

Case number (if known) **17-14040**

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☒ No
☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☐ No
☒ Yes. Describe.....

1800's antique desk; Byers Christmas Carolers collection

\$1,500.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No
☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- ☒ No
☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☐ No
☒ Yes. Describe.....

Assorted used clothing

\$1,000.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- ☐ No
☒ Yes. Describe.....

Mink Coat (\$2000), diamond rings, diamond necklaces and additional assorted jewelry (\$15,000)

\$17,000.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

- ☒ No
☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

- ☒ No
☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$69,500.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debtor 1 **Henry Charles Herrmann**
Debtor 2 **Karen Joan Herrmann**

Case number (if known) **17-14040**

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes.....

Cash on hand **\$300.00**

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes.....

Institution name:

**Wells Fargo Preferred Checking Acct ending
1547**

17.1. Checking

\$7,200.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account:

Institution name:

IRA

Morgan Stanley IRA

\$3,300.00

403(b)

Lincoln Investment 403(b)(7) Account

\$11,600.00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

Debtor 1 **Henry Charles Herrmann**
Debtor 2 **Karen Joan Herrmann**

Case number (if known) **17-14040**

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- ☒ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No
☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☒ No
☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information..

Debtor 1 Henry Charles Herrmann
Debtor 2 Karen Joan Herrmann

Case number (if known) 17-14040

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$22,400.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$7,028,000.00
56. Part 2: Total vehicles, line 5	\$120,108.00	
57. Part 3: Total personal and household items, line 15	\$69,500.00	
58. Part 4: Total financial assets, line 36	\$22,400.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	+ \$0.00	
62. Total personal property. Add lines 56 through 61...	\$212,008.00	Copy personal property total \$212,008.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$7,240,008.00

In re: Henry Charles Herrmann and Karen Joan Herrmann
Debtor

Case No.: 17-14040-MDC
Reporting Period: October, 2017

STATUS OF POSTPETITION TAXES

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero.
Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes.
Attach photocopies of any tax returns filed during the reporting period.

	Beginning Tax Liability	Amount Withheld or Accrued	Amount Paid	Date Paid	Check No. or EFT	Ending Tax Liability
Federal						
Withholding	N/A					
FICA-Employee						
FICA-Employer						
Unemployment						
Income						
Other:						
Total Federal Taxes						
State and Local						
Withholding						
Sales						
Excise						
Unemployment						
Real Property						
Personal Property						
Other:						
Total State and Local						
Total Taxes						

SUMMARY OF UNPAID POSTPETITION DEBTS

Attach aged listing of accounts payable.

	Number of Days Past Due					Total
	Current	0-30	31-60	61-90	Over 90	
Accounts Payable						
Wages Payable						
Taxes Payable						
Rent/Leases-Building						
Rent/Leases-Equipment						
Secured Debt/Adequate Protection Payments*	\$40,462.70	\$28,885.01		\$36,627.94	\$36,627.94	\$142,603.59
Professional Fees						
Amounts Due to Insiders*						
Other:						
Other:						
Total Postpetition Debts						

Explain how and when the Debtor intends to pay any past-due postpetition deb Postpetition mortgage payments will be made pursuant to stipulations entered into with secured parties.

***Mortgages:**

1442 S. Whitford, West Chester, PA \$934.29 monthly payment
1460 S. Whitford, West Chester, PA \$2,900.47 monthly payment
159 Salt House Rd., Corolla, NC \$10,515.95 monthly payment
125 Salt House Rd., Corolla, NC \$11,577.69 monthly payment
472 Island Lead Rd., Corolla, NC \$4,955.28 monthly payment
2305 Wesley Ave., N. Ocean City, NJ \$9,579.02 monthly payment

*"Insider" is defined in 11 U.S.C. Section 101(31).

In re: Henry Charles Herrmann and Karen Joan Herrmann
Debtor

ACCOUNTS RECEIVABLE RECONCILIATION AND AGING

Accounts Receivable Reconciliation		Amount
Total Accounts Receivable at the beginning of the reporting period		
+ Amounts billed during the period		
- Amounts collected during the period		
Total Accounts Receivable at the end of the reporting period		
Accounts Receivable Aging		Amount
0 - 30 days old		
31 - 60 days old		
61 - 90 days old		
91+ days old		
Total Accounts Receivable		
Amount considered uncollectible (Bad Debt)		
Accounts Receivable (Net)		

DEBTOR QUESTIONNAIRE

Must be completed each month	Yes	No
1. Have any assets been sold or transferred outside the normal course of business this reporting period? If yes, provide an explanation below.		X
2. Have any funds been disbursed from any account other than a debtor in possession account this reporting period? If yes, provide an explanation below.		X
3. Have all postpetition tax returns been timely filed? If no, provide an explanation below.	X	
4. Are workers compensation, general liability and other necessary insurance coverages in effect? If no, provide an explanation below.	X	
5. Has any bank account been opened during the reporting period? If yes, provide documentation identifying the opened account(s). If an investment account has been opened provide the required documentation pursuant to the Delaware Local Rule 4001-3.		X